									Application or Docket Number				
PATENT APPLICATION FEE DETER Effective October 1, 2						•				10789359			
CLAIMS AS FILED - PART (Column 1)						(Column 2)			ENTITY	OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			36					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			36 minus 20=		. 16			XS 9=	144.	OR	XS18=		
INDEPENDENT CLAIMS			4 minus 3 =					X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter					7 -0" in	column 2	I	TOTAL		OR	TOTAL		
I CLAIMS AS AMENDED - PAF						•				10	OTHER	THAN	
8	3106	(Column 1)			mn 2)	(Column 3)		SMAL	L ENTITY	OR	SMALL		
₹		CLAIMS REMAINING		NUM	BER	PRESENT		RATE	ADDI-/ TIONAL		RATE	ADDI- TIONAL	
AMENDMENT A		AFTER AMENDMENT	·		FOR	EXTRA		25.80	FEE			FEE	
	Total	· 22	Minus	- :	36	= 0	lł	- K8-37		OF	50.00 XXX		
	Independent	· /	Minus		4	-6	4	X43-) X .	OR	300.00 X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		۱ [+*45≐		OR	+290=		
02/06/07						L	TOTA			TOTAL			
(Column t) (Colu					mn 2)	(Column 3)		OOT. FE	E L	,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING		HIGH	IEST BER	PRESENT	IT		ADDI-			ADDI-	
		AFTER AMENIOMENT			DUSLY FOR	EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	.85	Minus	**	36	-		xs F		OR	X\$\$#8=		
	Independent	• 5	Minus	***	4	<u> • / </u>		199-	100	OR	7500 P		
FIRST PRESENTATION OF MULTIPLE DEPENDENT					CLAIM		1	+145=		OR	+290=		
		•					L	TOTA	100		TOTAL	•	
		(Column 1)	•	(Colu	mn 21	(Column 3)	4	DDIT FE	E L'		ADDIT. FEE		
NTC	\	CLAIMS		HIGH	EST		Г		ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		PREVI PAID	BER DUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
AMENDMENT	Total		Minus	••				XS 9=	1	OR	X\$18=	ree	
NE I	Independent	•	Minus			•	╽┟	X43=	 		X86=	1	
<u> </u>	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDEN	CLAIM		╽┝		╂	OR	700-		
* If the entry in column 1 is less than the entry in column 2, writ								+:45=		OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE					s less than 20. enter 20. ADDIT E			TOTAL DDIT. FEE					
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3," The "Highest Number Previously Paid For" (Total or Independent) is the highest number to								d in the a	ppropriate box	in coh	umn I.	1	
ORM	ORM PTO-875 (Rev 1003)						Pater	u and Test	emark Office, U	S OFP	ARTHENTOS	COMMERCE	